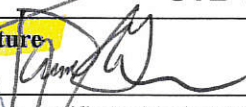


ATTACHMENT 4
BID/BIDDER CERTIFICATION SHEET

Only an individual who is authorized to bind the bidding firm contractually shall sign the Bid/Bidder Certification Sheet. The signature must indicate the title or position that the individual holds in the firm. This Bid/Bidder Certification Sheet must be signed and returned along with all "required attachments" as an entire package with original signatures. The bid must be transmitted in a sealed envelope in accordance with IFB instructions.

- A. Our all-inclusive bid is submitted in a sealed envelope marked "**Bid Submittal - Do Not Open**".
- B. All required attachments are included with this certification sheet.
- C. The signature affixed hereon and dated certifies compliance with all the requirements of this bid document. The signature below authorizes the verification of this certification.
- D. The signature and date affixed hereon certifies that this bid is a firm offer for a 90-day period.

An Unsigned Bid/Bidder Certification Sheet May Be Cause for Bid Rejection

1. Company Name YALE/CHASE EQUIPMENT AND SERVICES INC.	2. Telephone Number 562-463-8000	2a. Fax Number 562-463-8093
2b. Email Address DOUGG@YALECHASE.COM		
3. Address 2615 PELLISSIER PLACE, WHITTIER, CA 90601		
Indicate your organization type:		
4. <input type="checkbox"/> Sole Proprietorship	5. <input type="checkbox"/> Partnership	6. <input checked="" type="checkbox"/> Corporation
Indicate the applicable employee and/or corporation number:		
7. Federal Employee ID No. (FEIN) 33-0585977	8. California Corporation No. 1831264	
Indicate the Department of Industrial Relations information:		
9. Contractor Registration Number	1000015057	
Indicate applicable license and/or certification information:		
10. Contractor's State Licensing Board Number 734316	11. PUC License Number CAL-T-	
12. Bidder' Name (Print) J.D. GRAVEN	13. Title CFO	
14. Signature 	15. Date 09/22/16	
16. Are you certified with the Department of General Services, Office of Small Business and Disabled Veteran Business Enterprise Services (OSDS) as:		
a. Small Business Enterprise Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
If yes, enter certification number: _____		
b. Disabled Veteran Business Enterprise Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
If yes, enter your service code below: _____		
NOTE: A copy of your Certification is required to be included if either of the above items is checked "Yes".		
Date application was submitted to OSDS, if an application is pending: _____		

STATE OF CALIFORNIA - DEPARTMENT OF TRANSPORTATION
BID PROPOSAL
ADM-1412 (REV. 11/2015)

ATTACHMENT 1

CONTRACTOR'S NAME (Please Print):

ITEM NO.	ESTIMATED QUANTITY	UNIT OF MEASURE	ITEM	UNIT PRICE (Price Per Unit of Measure)	TOTAL (Estimated Quantity X Unit Price)
1	4	1 Semi-Annual	Four (4) Semi-Annual Inspections to include, repair, and general maintenance in accordance with Exhibit A, Scope of Work.	2,240.00 \$	8,960.00 \$
2	200	1 Hour	Emergency repairs in accordance with Exhibit A, Scope of Work, Item 6, G.	125.00 \$	25,000.00 \$
3	N/A	10% of Total Contract Cost	Projected Parts/Materials Contractor will be reimbursed for the actual cost for approved parts, materials, or supplies, without additional allowance for mark-up. This is only an estimate, not a guarantee of the amount spent for this line item. Total costs for parts, materials, or supplies shall not exceed this amount.	10% OF SUBTOTAL ABOVE (SUBTOTAL X .10= 10%)	3,396.00 \$
SUBTOTAL QUANTITIES AND TOTAL SET FORTH FOR A UNIT BASIS ITEM, THE				TOTAL THIS PROPOSAL	\$ 37,356.00

(1) THE ABOVE QUANTITIES ARE ESTIMATES ONLY AND ARE GIVEN AS A BASIS FOR COMPARISON OF BIDS. NO GUARANTEE IS MADE OR IMPLIED AS TO THE EXACT QUANTITY THAT WILL BE NEEDED.
(2) IN CASE OF DISCREPANCY BETWEEN THE UNIT PRICE AND THE TOTAL SET FORTH FOR A UNIT BASIS ITEM, THE UNIT PRICE SHALL PREVAIL.